

| | | (Column 1) | (Column 2) |
|----------------------------------|---------------|--------------|--------------------------|
| TOTAL CLAIMS | | | |
| FOR | NUMBER FILED | NUMBER EXTRA | |
| TOTAL CHARGEABLE CLAIMS | 16 minus 20 = | * | |
| INDEPENDENT CLAIMS | 3 minus 3 = | * | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | <input type="checkbox"/> |

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

| AMENDMENT A | (Column 1) | | (Column 2) | (Column 3) |
|--|---|-------|---|--------------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | • 9 | Minus | .. 20 | = 0 |
| Independent | • 2 | Minus | ... 3 | = 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| TYPE | | OR | SMALL ENTITY |
|-----------|--------|------|------------------|
| RATE | Fee | RATE | Fee |
| BASIC FEE | 355.00 | OR | BASIC FEE 710.00 |
| X\$ 9= | | OR | X\$18= |
| X40= | | OR | X80= |
| +135= | | OR | +270= |
| TOTAL | | OR | TOTAL |

| SMALL ENTITY | | OR | OTHER THAN SMALL ENTITY |
|---------------------|------------------------|------|----------------------------|
| RATE | ADDI- TIONAL FEE | RATE | ADDI- TIONAL FEE |
| X\$ 9= | | OR | X\$18= |
| X40= | | OR | X80= |
| +135= | | OR | +270= |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE |

| AMENDMENT B | (Column 1) | | (Column 2) | (Column 3) |
|--|---|-------|---|--------------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | • | Minus | .. | = |
| Independent | • | Minus | ... | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| RATE | | ADDI- TIONAL FEE | ADDI- TIONAL FEE |
|---------------------|--|------------------------|------------------------|
| X\$ 9= | | OR | X\$18= |
| X40= | | OR | X80= |
| +135= | | OR | +270= |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE |

| AMENDMENT C | (Column 1) | | (Column 2) | (Column 3) |
|--|---|-------|---|--------------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | • | Minus | .. | = |
| Independent | • | Minus | ... | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | <input type="checkbox"/> |

| RATE | | ADDI- TIONAL FEE | ADDI- TIONAL FEE |
|---------------------|--|------------------------|------------------------|
| X\$ 9= | | OR | X\$18= |
| X40= | | OR | X80= |
| +135= | | OR | +270= |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.